

4P-1733  
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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/023,185
	<b>Filing Date</b>	December 18, 2001
	<b>First Named Inventor</b>	Dufournier
	<b>Group Art Unit</b>	1733
	<b>Examiner Name</b>	Adrienne C. Johnstone
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b> A32631 PCT USA-A-I

## ENCLOSURES (check all that apply)

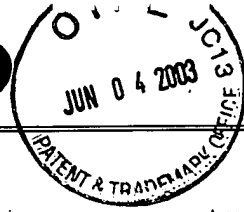
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input type="checkbox"/>		<b>RECEIVED</b> <b>JUN 6 2003</b> <b>TC 1700</b>

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm or Individual name</b>	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112	
<b>Signature</b>	Att Name: Kimberly J. McGraw PTO Reg: 50,994	
<b>Date</b>	6-2-2003	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on this date: 6-2-2003		
<b>Typed or printed name</b>	Kimberly J. McGraw	
<b>Signature</b>	<i>Kimberly J. McGraw</i>	<b>Date</b> 6-2-2003



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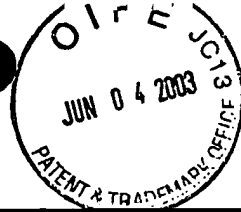
Attorney Docket Number: A32631 PCT USA-A-I

Title:

SAFETY INSERT GENERATING A TRAVERSE VIBRATING SIGNAL AND DEVICE FOR  
SENSING THE TIRE BEARING ON THE INSERT

RECEIVED  
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TC 1700

Use Space Below for Additional Information:

**BAKER BOTTS LLP**

# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT (\$)** 110
**Complete if Known**

Application Number	10/023,185
Filing Date	December 18, 2001
First Named Inventor	Dufournier
Examiner Name	Adrienne C. Johnstone
Art Unit	1733
Attorney Docket No.	A32631 PCT/USA-A-I

**RECEIVED**  
JUN 11 2003
**METHOD OF PAYMENT** (check all that apply)
☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

 Deposit  
Account  
Number  
Deposit  
Account  
Name

02-4377

Baker Botts LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee required under 37CFR 1.16 and 1.17

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

**SUBTOTAL (1)** (\$ ) 0
**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims		Extra Claims		Fee from below		Fee Paid	
Independent Claims		- 20 =	0	X		=	0
Multiple Dependent		- 3 =	0	X		=	0

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$ ) 0

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION** (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ ) 110
**SUBMITTED BY**

(Complete if applicable)

Name (Print/Type)

Kimberly J. McGraw

Registration No.  
(Attorney/Agent)

50,994


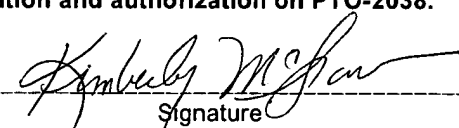
Telephone 212-408-2502

Signature

Date

6-2-2003

# BAKER BOTTS LLP

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) A32631 PCT USA-A-I	
	In re Application of _____		
	Application Number      10/023,185		Filed      December 18,
	For <b>SAFETY INSERT GENERATING A</b> * see attached		
	Group Art Unit      1733		Examiner Adrienne C. Johnstone
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</p> <p><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</p> <p><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</p> <p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</p> <p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-4377</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p> </div> <div style="width: 35%; text-align: center;"> <div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 150px;"> <b>RECEIVED</b>  <b>JUN 04 2003</b>  <b>TC 1700</b> </div> <div style="margin-top: 10px;">             \$ _____              \$ _____              \$ _____              \$ _____              \$ _____           </div> </div> </div>			
<p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><u>June 2, 2003</u></p> <p style="text-align: center;">Date</p> <p style="text-align: center;">PTO Reg No.: 50,994</p> </div> <div style="width: 45%; text-align: center;"> <p><u></u></p> <p style="text-align: center;">Signature</p> <p style="text-align: center;">Kimberly J. McGraw</p> <p style="text-align: center;">Typed or printed name</p> </div> </div> <p style="font-size: small; margin-top: 20px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>			
<input type="checkbox"/> Total of _____ forms are submitted.			

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